	PATENT APPLICATION FEE DETERMINATION REC								Application of Docket Number													
_	Effective October 1, 2000							09/868419														
				FILED - PART I (Column 1) (Column 2)				SMALL TYPE	ENTITY	OF		R THAN										
L	TOTAL CLAIM		The state of the s			è	RATE	FEE	٦̈́	RATE	FEE											
	OR	NUMBER	NUMBER FILED NUI		BER EXTRA	1	BASIC F		OF	BASIC FE												
	OTAL CHARGI	30 minus 20= ·				1	XS 9=		OF	Yana	1000											
	NDEPENDENT	A n	A minus 3 =			1	X40=		1	V20	+											
	IULTIPLE DEPE	ENDENT CLAIM	PRESENT	7			1		+			1										
	If the difference	e in column 1 is	s less than z	ero, enter	"0" in	column 2		+135=		OR	L	20										
	CLAIMS AS AMENDED - PART II							TOTAL	<u> </u>	OR		1/30										
		<u> </u>	SMALL	ENTITY	OR	SMALL	THAN ENTITY															
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	.]	RATE	ADDI- TIONAL FEE										
	Total	· /·/	Minus	. 3	0	=	1 [X\$ 9=	:.	OR	X\$18=											
	Independent	· ' /	Minus	•••	4	=	 	X40=.		1	X80=											
┞	FIRST PRES	ENTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		▎┟		╁──	OR												
							L	+135=	<u> </u>	OR	+270=											
		(Column 1)		(Calum	- O\	(Column 0)	A	DOIT. FEE		OR ,	TOTAL ADDIT. FEE											
AMENDMENT B	·	CLAIMS REMAINING	2-97:00	(Colum	ST	(Column 3)	lг	· ·	ADDI-	1 [ADOL										
		AFTER AMENDMENT		PREVIOL PAID FO	JSLY .	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE										
	Total	* .	Minus	. **		=		X\$ 9≃		OR	X\$18=											
	Independent	MTATION OF M	Minus	•••		=		X40=		OR	X80=											
	·	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM			+135=		OR	+270=	<u> </u>										
		•					AC	TOTAL		OR ,	TOTAL											
		(Column 1)		(Columr		(Column 3)				•												
AMENDMENT C	tike i strong etikeji	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL 'FEE	ſ	RATE	ADDI- TIONAL										
Ž	Total	•	Minus	••		8	F	X\$ 9=	ree		X\$18=	FEE										
AME	Independent	•	Minus	•••		=	⊢	X40=		OR		 -										
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H	135=		OR	X80=											
• If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=											
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE TOTAL OR ADDIT. FEE TOTAL																						
											ORM PTO-475											

482.70 "

WAR.

342,25. w